

Carroll County Board of Commissioners

COVID-19 Data Update October 22, 2020

**Ed Singer, L.E.H.S.
Carroll County Health Officer**

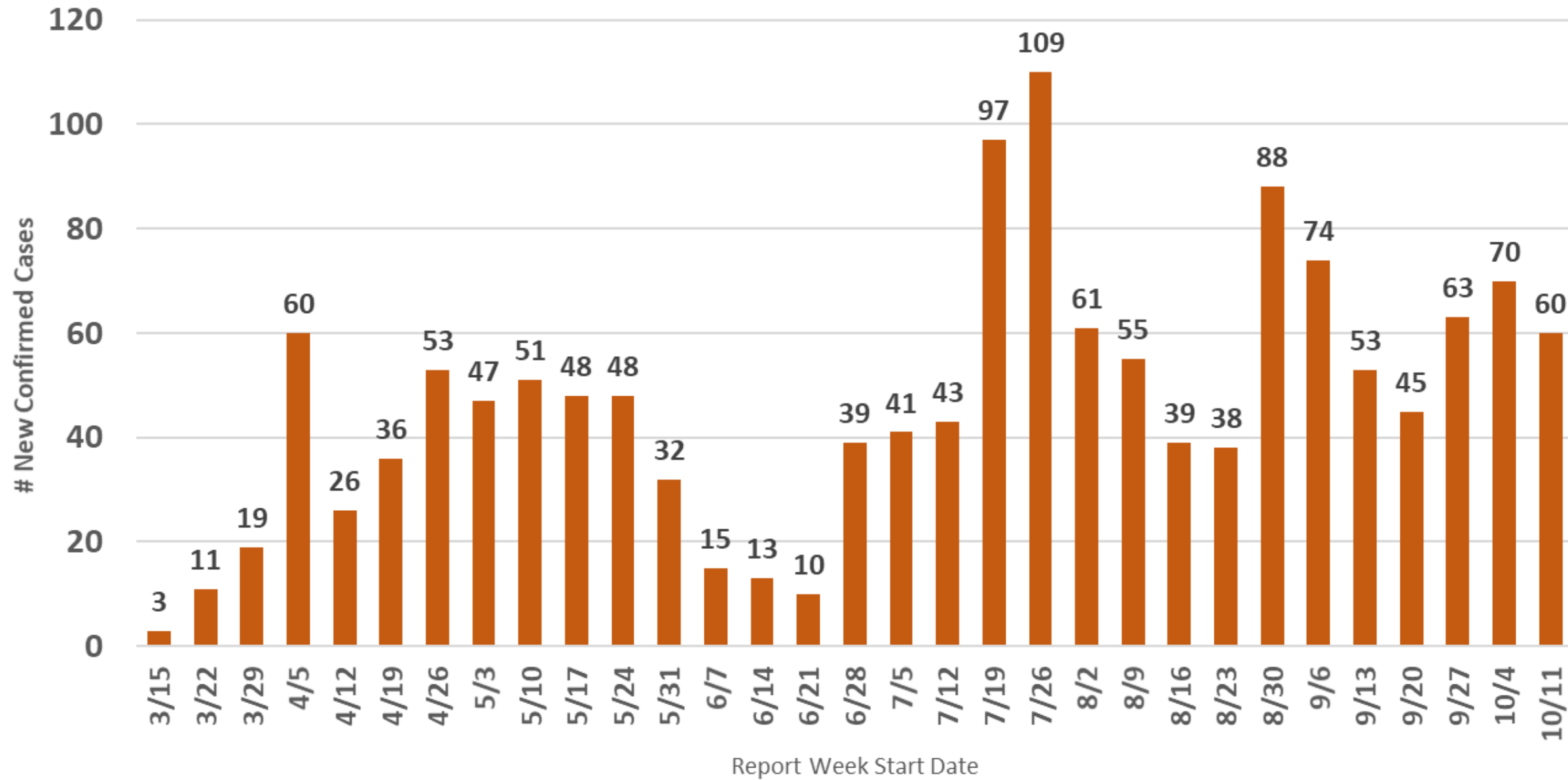
**Carroll County
Health Department**



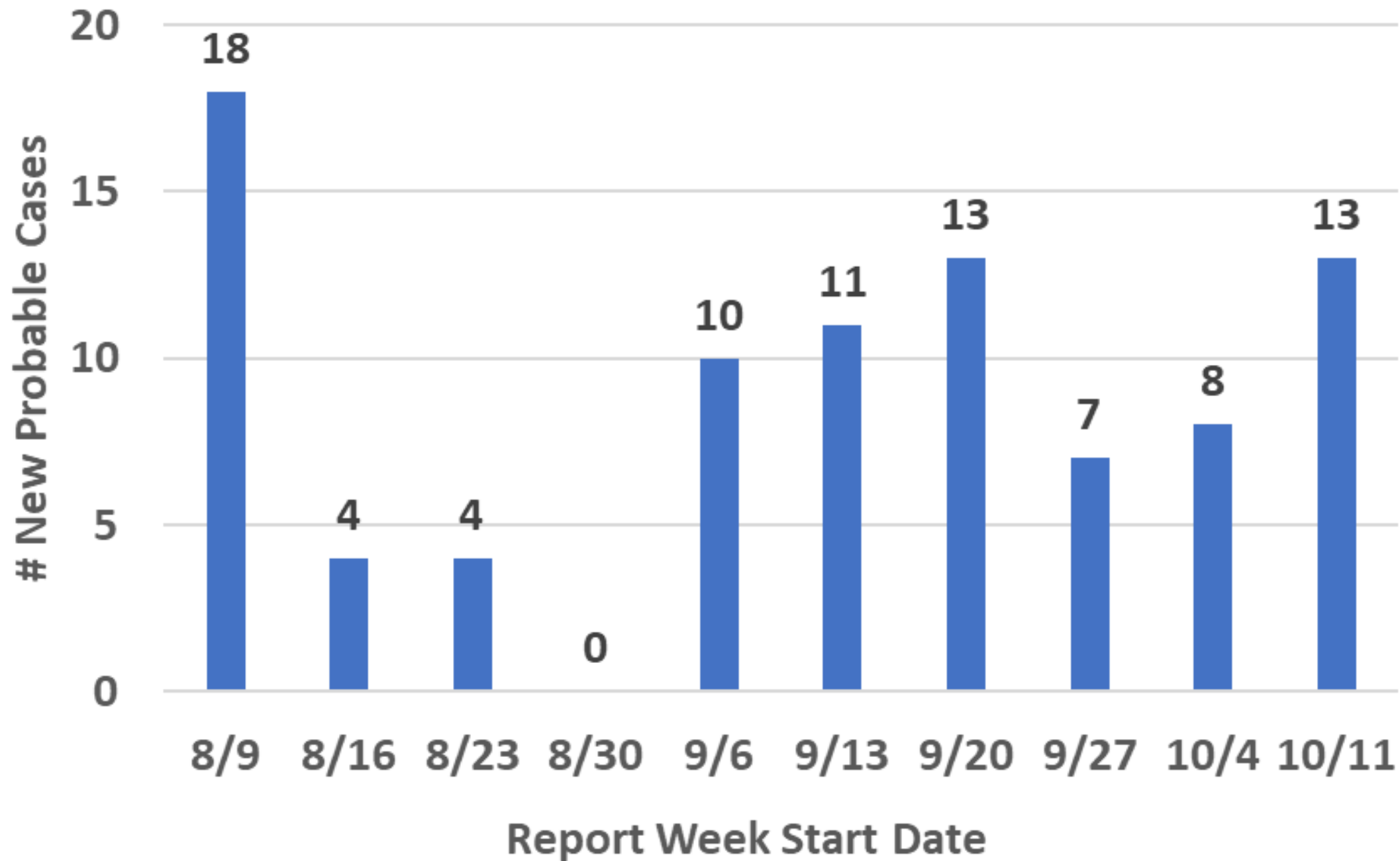
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Community* Cases by Report Week



Probable Cases by Report Week

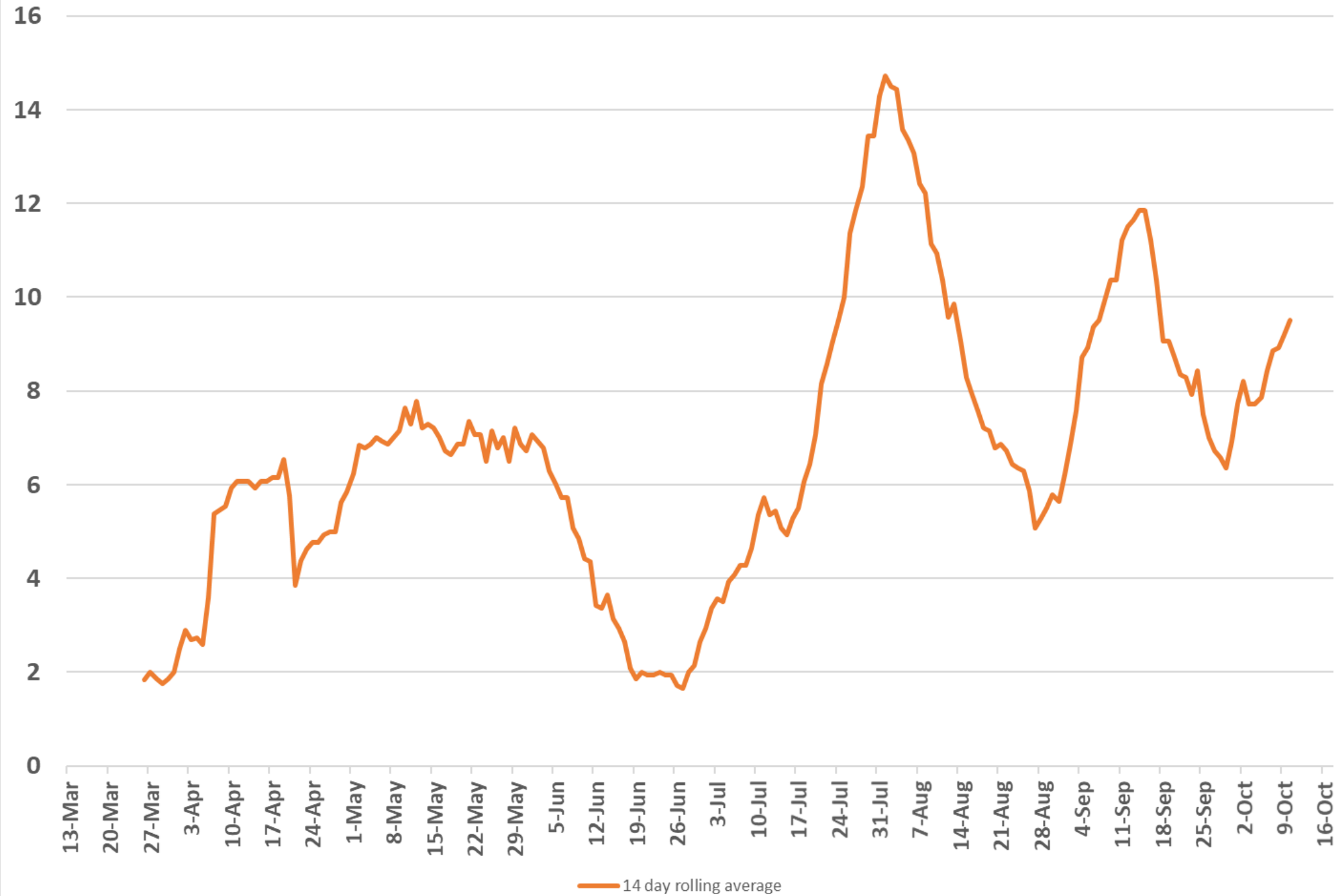


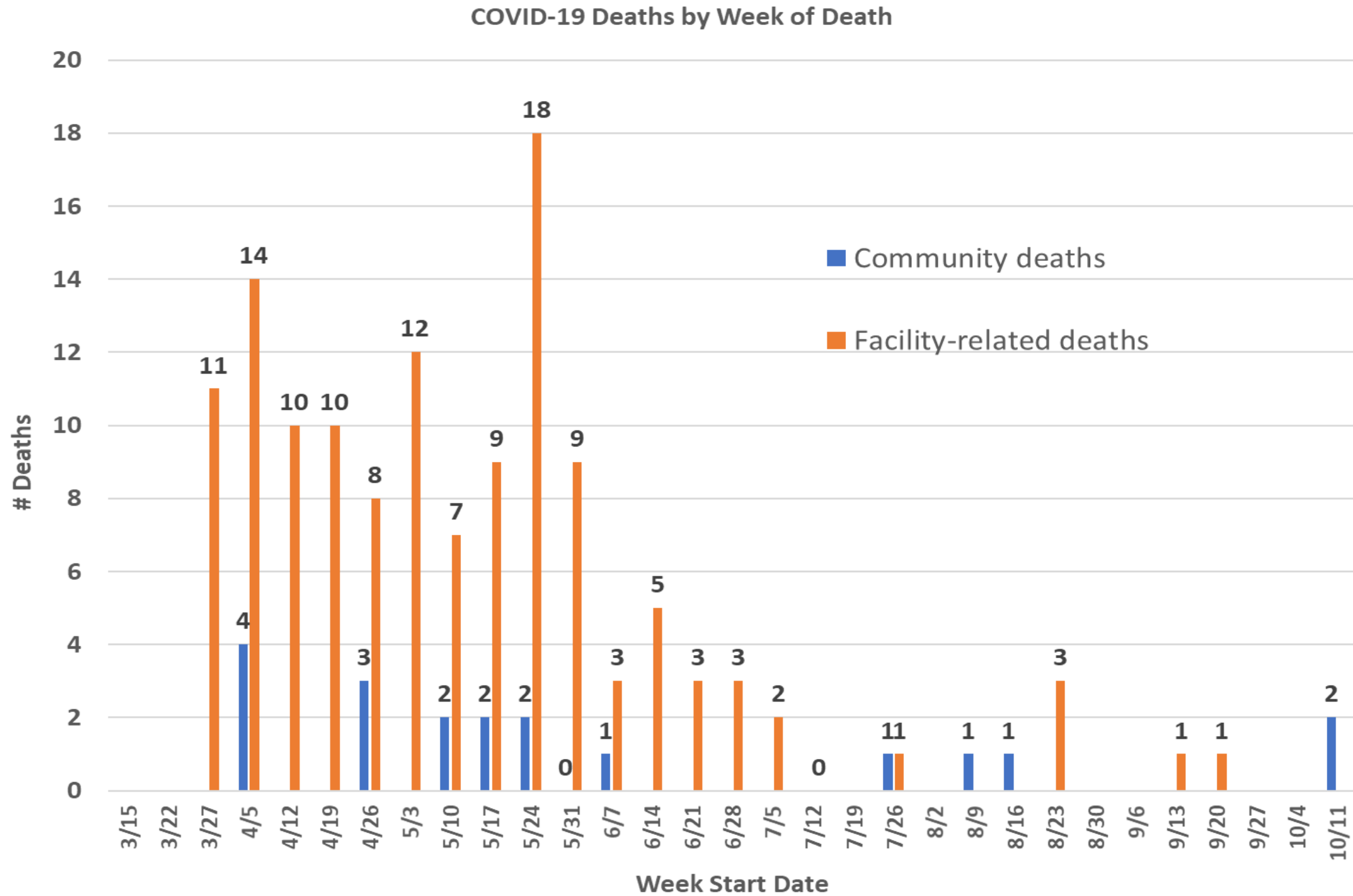
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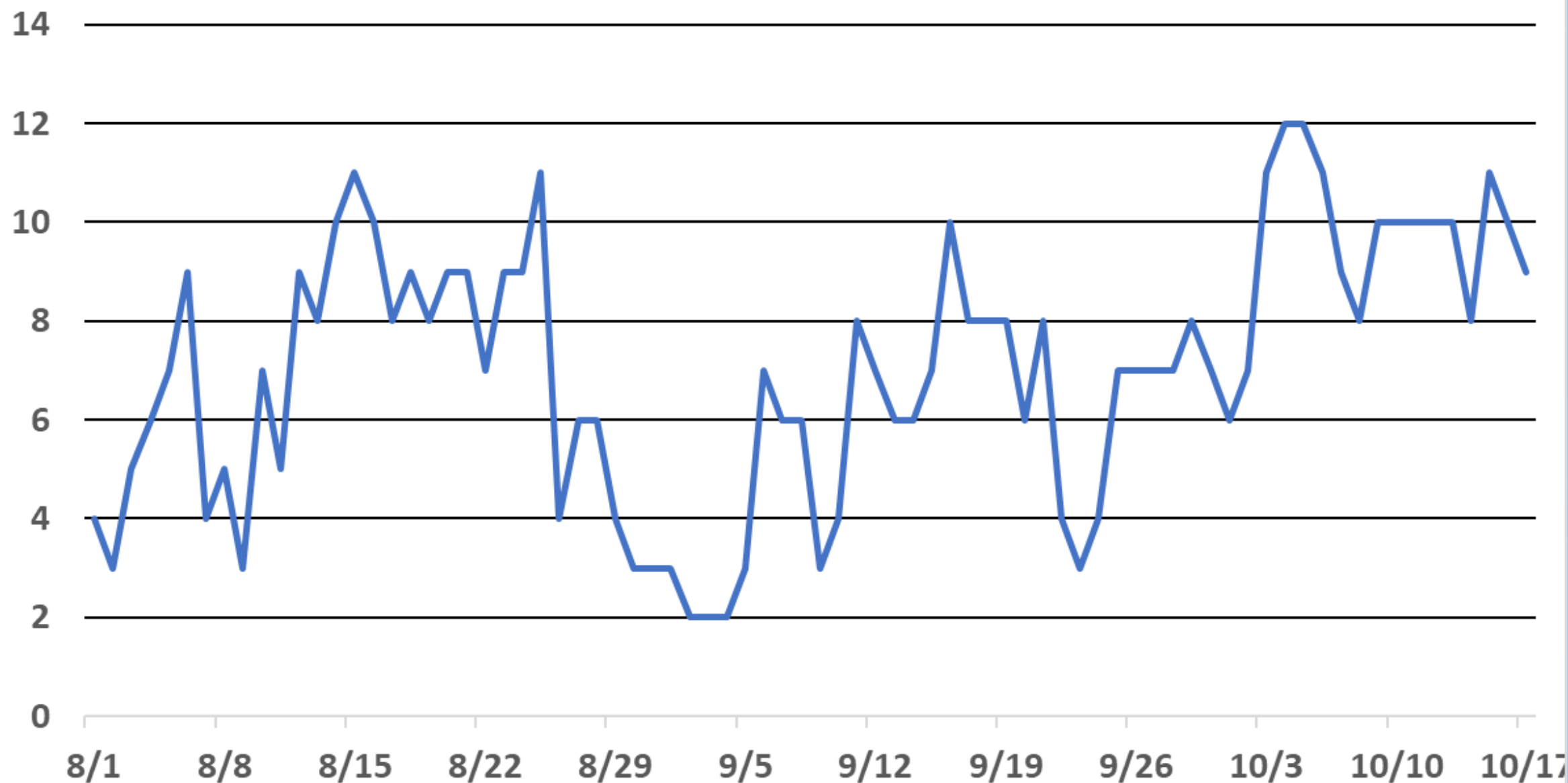
14-Day Rolling Average of New Community COVID-19 Cases by Report Date



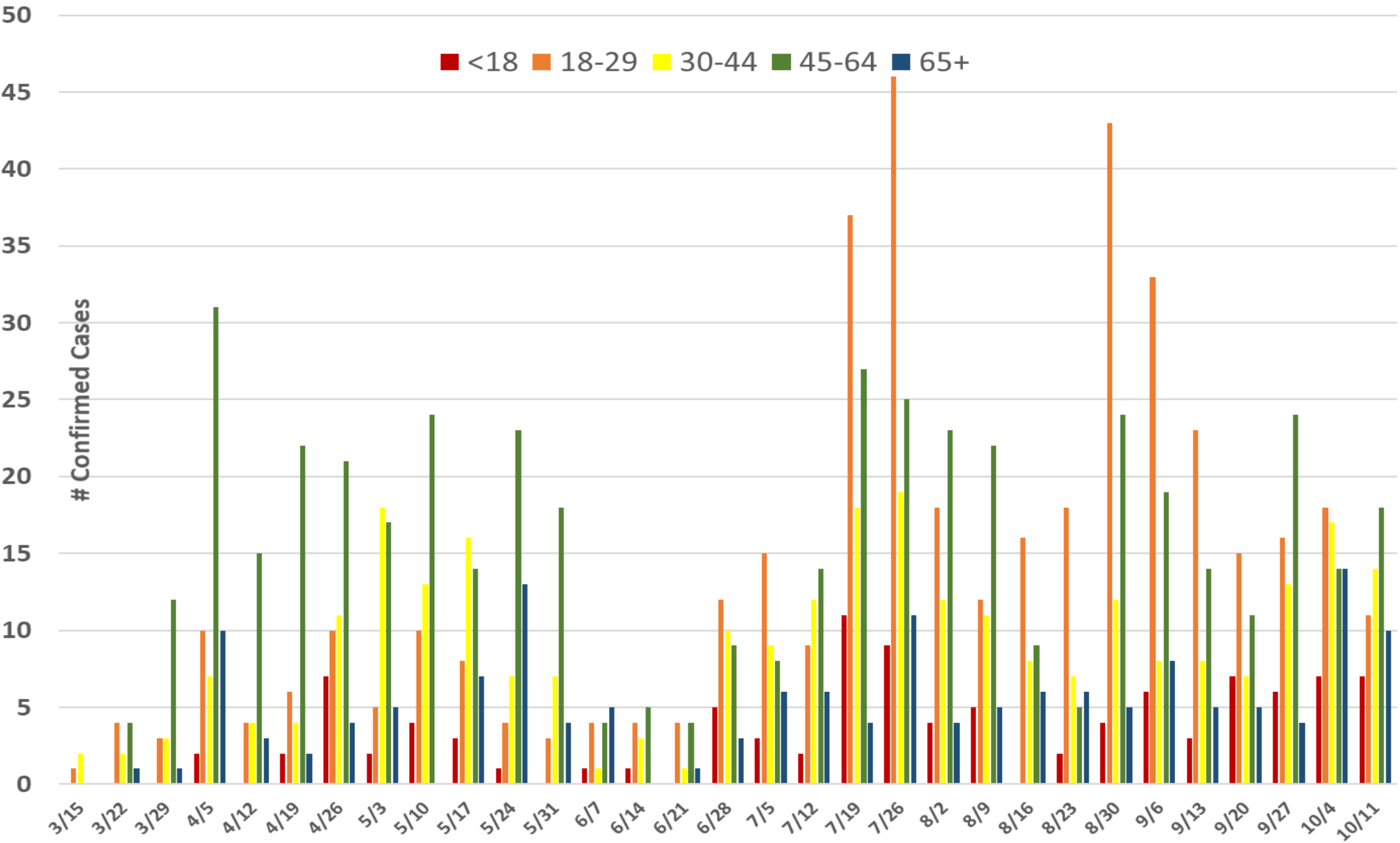




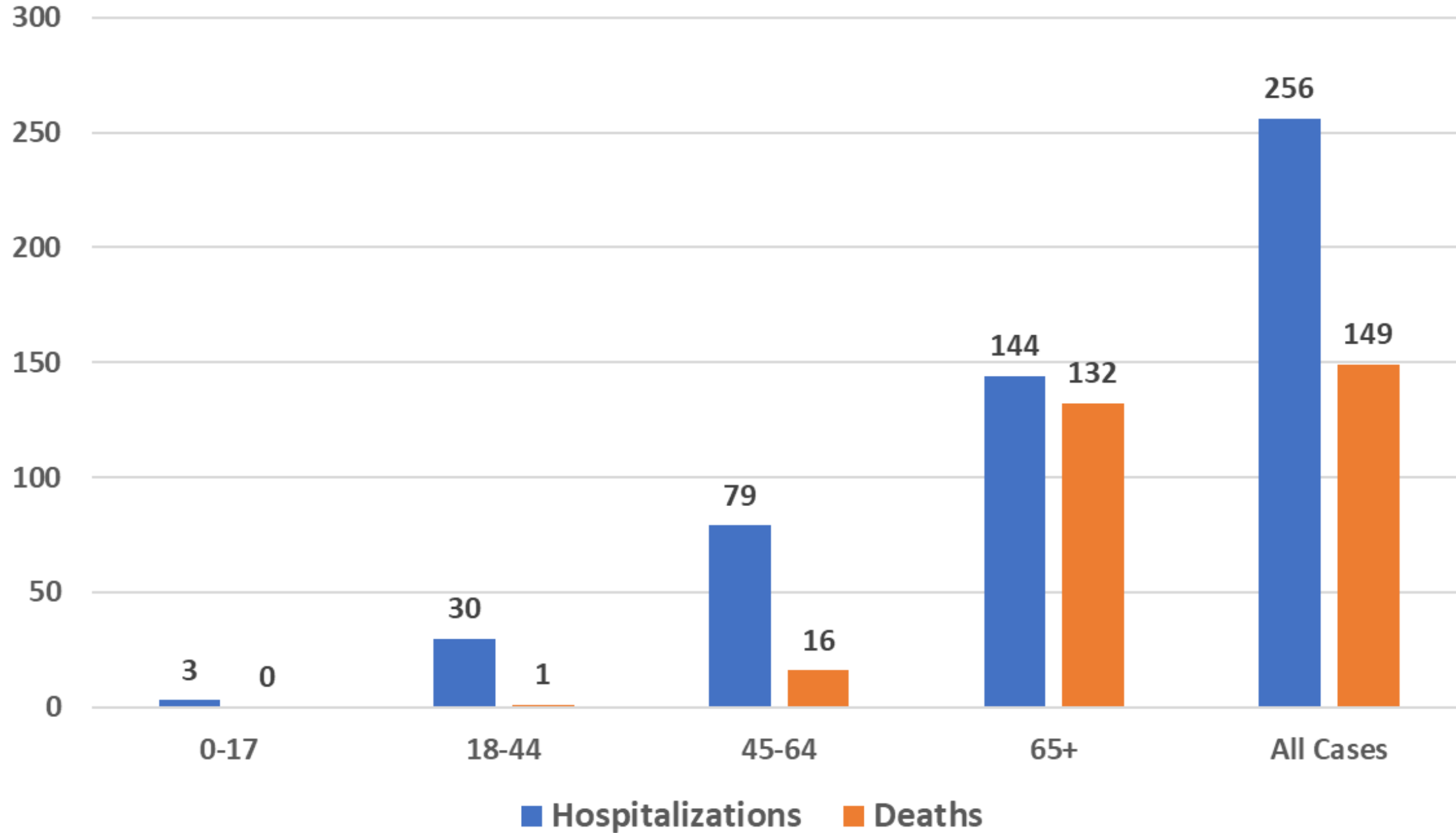
ICU Beds in Use for Any Reason



Community Cases by Week and Age Group (years)



Hospitalizations and Deaths by Age Group (years): All COVID-19 Cases



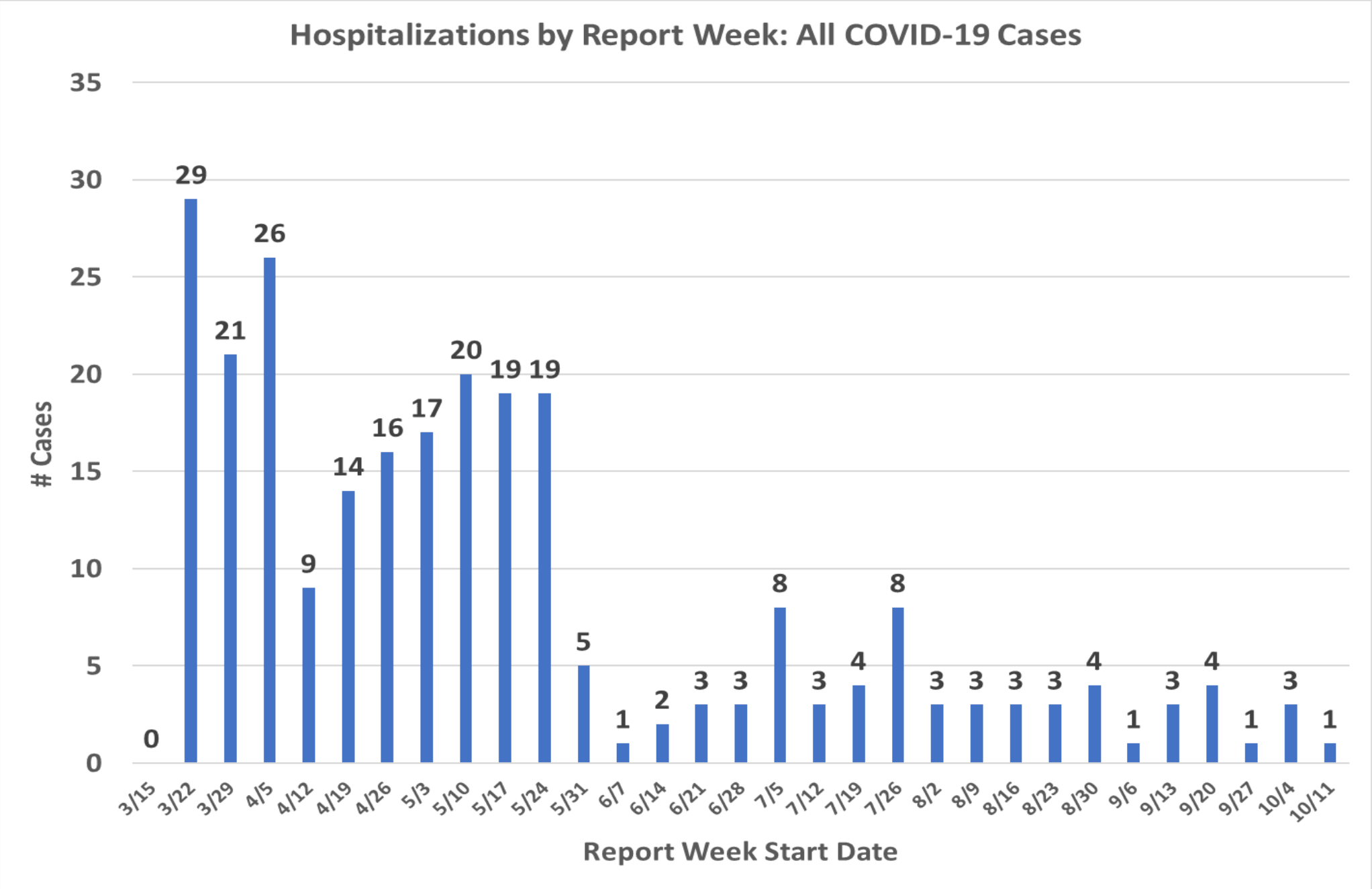
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Please note this data is organized by case report date and shows if a confirmed COVID-19 case was ever hospitalized.

It does not reflect the hospitalization date or the current number of people hospitalized for COVID-19, and does not include any probable cases or persons under investigation (PUIs) for COVID-19.



COVID-19 Fatalities in Carroll County

All Deaths (n=150):

Range: 43-103 years

Average age: 80

Community Deaths (n=20):

Range: 56-86

Average age: 74

Facility Deaths (n=130):

Range: 43-103

Average age: 81

From late January to early October 2020, the U.S. had 299,000 more deaths than the typical number during the same period in previous years (excess deaths)

At least
2 out of 3
of these excess deaths were
from COVID-19

The largest percentage increases were
among people who were **Hispanic or
Latino** and **adults aged 25–44**

Compared with patients hospitalized with flu*, hospitalized COVID-19 patients had a higher risk for 17 complications† and death



5x

higher risk of dying
in the hospital

Black or African American patients and Hispanic or Latino patients developed some severe complications more frequently than White patients

Prevent COVID-19 and flu to save lives

Wear masks, stay at least 6 feet from others, wash hands often, and get a flu vaccine

* Veterans Health Administration hospitalized patients (3,948 with COVID-19 and 5,453 with influenza); data adjusted for age, sex, race/ethnicity, and underlying medical conditions

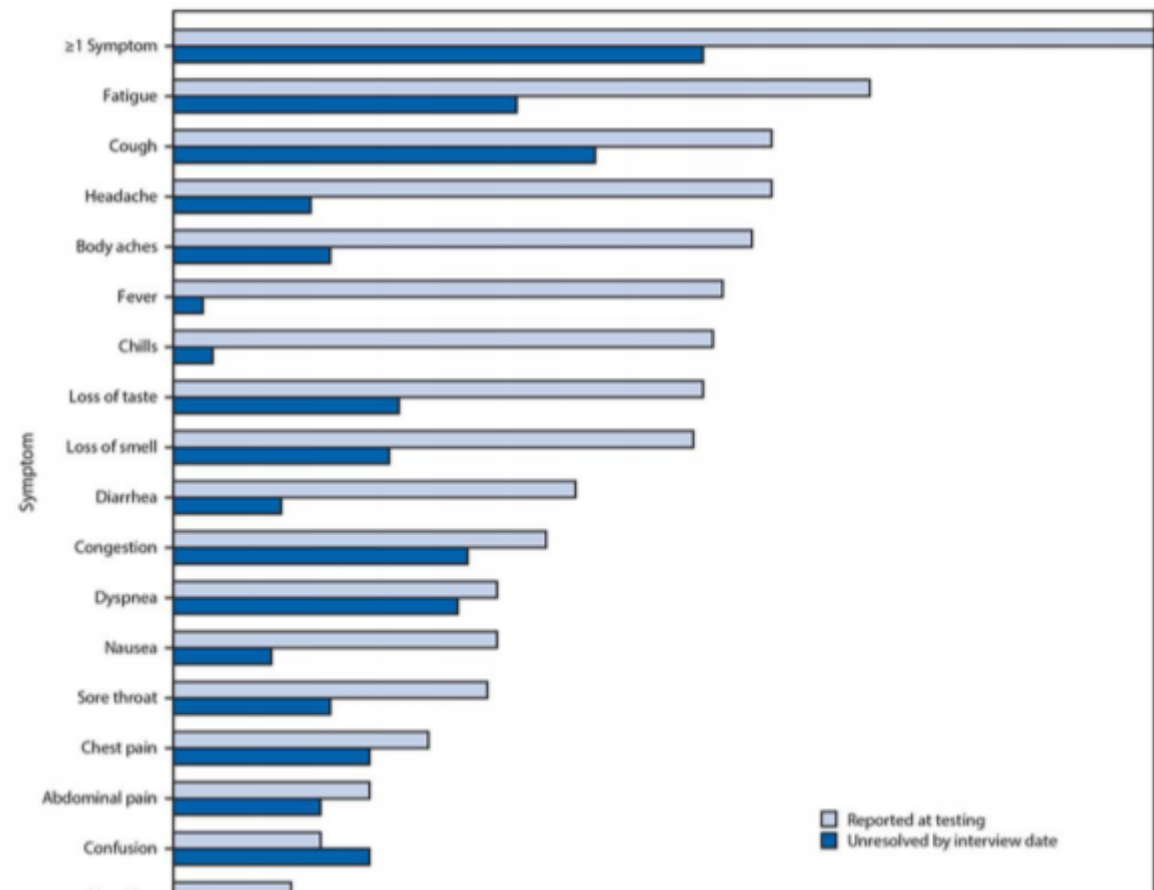
† Some complications included heart inflammation, blood clots, and liver failure

Lingering symptoms reported by participants of a multi-state phone study in the USA

Symptoms which may persist:

- Fatigue
- Cough, congestion or shortness of breath
- Loss of taste or smell
- Headache, body aches
- Diarrhea, nausea
- Chest or abdominal pain
- Confusion

Self-reported symptoms at the time of positive SARS-CoV-2 testing results and unresolved symptoms 14–21 days later among outpatients (N = 274) United States, March–June 2020

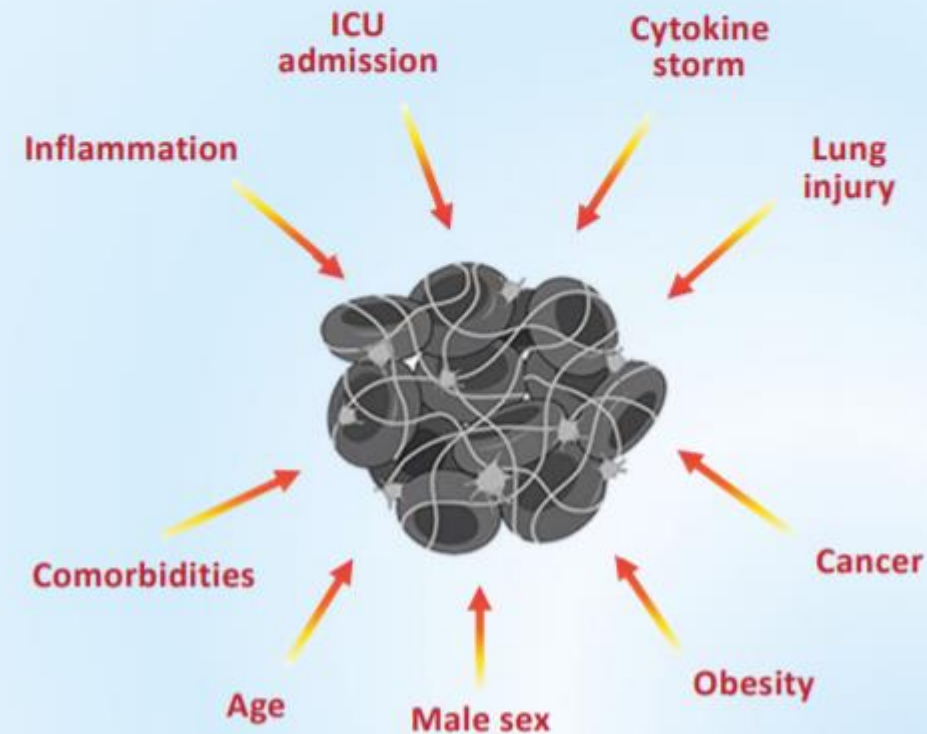


COVID-19 may increase the risk of long-term health problems

Body systems and organs that can be affected :

- **Heart**
 - Damage to heart muscle, heart failure
- **Lungs**
 - Damage to lung tissue and restrictive lung failure
- **Brain and the nervous system**
 - Loss of sense of smell (anosmia)
 - Consequences of thrombo-embolic events such as pulmonary embolism, heart attack, stroke
 - Cognitive impairment (e.g. memory and concentration)
- **Mental health**
 - Anxiety, depression, post-traumatic stress disorder and sleep disturbance
- **Musculoskeletal and others**
 - Pain in join and muscles
 - Fatigue

COVID-19 related risk factors for venous thromboembolism



What does this mean for patients?

- **COVID-19 can result in prolonged illness and persistent symptoms**, even in young adults and persons with no underlying medical conditions who were not hospitalized
- **Much is still unknown** about how COVID-19 affects people over time
- **More time and research is needed** to understand:
 - the long-term effects of COVID-19
 - why symptoms persist or recur
 - how these health problems affect patients
 - the clinical course and likelihood of full recovery

Questions?

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